PTO/SB/06(68-03)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF CONMERCE

| FATER APPLICATION FEE DETERMINATION RECORD                  |   |                           |             |          |                                  |                   |      |                    |                         |                | Application of Docket Number |                        |  |
|---|---|---------------------------|-------------|----------|----------------------------------|-------------------|------|--------------------|-------------------------|----------------|------------------------------|------------------------|--|
| Substitute for Form PTO-875                                 |   |                           |             |          |                                  |                   |      |                    |                         | 14             | 10/062279                    |                        |  |
| CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2) SMALL ENTITY |   |                           |             |          |                                  |                   |      |                    |                         | OR             | OTHER THAN SMALL ENTITY      |                        |  |
| Ŀ   | FOR NUMBER  |                           |             |          | NUL                              | BER'EXTRA         | 7    | RATE               | . FEE                   | <b>ገ</b> ` · . |                              | 1                      |  |
|   | SIC FEE<br>CFR 1.15(a))   |                           |             |          | •:•                              |                   | 7    |                    | 1.                      | 1              | BATE                         | FEE                    |  |
|   | TAL CLAIMS<br>CFR 1.16(cj)  |                           |             | minus:   | 20 =                             | · · · ·           | 7    | X i                | <del> </del> -          | . OR           | <del> </del>                 |                        |  |
|   | CFR 1.16(b))  | VIUS .                    |             |          |                                  | <del></del>       | -    | . x s =            | <del> </del>            | OR             | X=                           |                        |  |
| -   |   |                           |             |          |                                  | <del></del>       | -    | X 5=               | ·                       | · OR           | X 5 0                        |                        |  |
| MU  | . TIPLE DEPEND  | ENT CLAIN                 | PRESEN      | <u>п</u> | (37 CFR 1.16(d))                 |                   | +1:= |                    | OR                      | +5=            | .:                           |                        |  |
| . 4   | * If the difference in column 1 is less than zero, enter *O* in column 2. |                           |             |          |                                  |                   |      |                    |                         | OR:            | TOTAL                        |                        |  |
| /   | ) 00.   | CLAIMS A                  | AS AME      | ENDEC    | D - PARTII                       |                   |      |                    |                         |                |                              |                        |  |
| <b>4</b>  | OF 1-06   | (Colum                    |             |          | (Column 2)                       | (Column 3)        | 7 6  | SMALL              | ENTITY                  | OR             | OTHER<br>SMALL               | R THAN<br>ENTITY       |  |
| ENT   |   | REMA<br>AFT<br>AMENO      | INING<br>ER |          | NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA  |      | RATE               | ADDI-<br>TIONAL<br>FEE  |                | RATE                         | ADDI-<br>TIONAL        |  |
| AMENDMENT   | Total<br>(37 CFR 1,18(c))<br>Independent                                  | 1. 1.                     | 5_          | Minus    | 20                               |                   |      | X 5 =              |                         | OR             | X'S=                         | FEE                    |  |
| ΣΨ  | (37 CFR 1,16(b))  | 4                         |             | Minus    | "4                               | 1'-               | t L  | x s =              | $\cdot$                 | OR             | X 5 =                        |                        |  |
| ₹   | FIRST PRESEN  | TATION OF                 | MULTIPLE    | DEPEND   | ENT CLAIM (37 C                  | FR 1.16(dj)       | 1 [  | +s =               |                         | OR             |                              | -                      |  |
|   |   |                           |             |          |                                  | · · · · · · ·     | י נ  | TOTAL<br>ADO'L FEE |                         | OR .           | TOTAL                        | <del>-   -</del>       |  |
|   |   | (Colum                    | n 1)        |          | (Column 2)                       | (Column 3)        |      |                    | _ <u>-</u>              | Ų,,            | ADO'L FEE                    |                        |  |
|   |   | CLAH                      | VIS         |          | . HIGHEST                        | 1                 | 1 F  |                    | •                       |                |                              |                        |  |
| <b>AMENDMENT</b>  |   | REMAII<br>AFTE<br>AMENDI  | R           | . •      | NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA  |      | RATE               | ADDI-<br>TIONAL"<br>FEE | •              | RATE                         | ADDI-<br>TIONAL<br>FEE |  |
| S   | Total<br>(37 CFR 1.16(c))   |                           |             | Minus    | ••                               | Ξ' '              | ŀΓ   | (\$=               |                         | OR             | X 5 =                        | 722                    |  |
|   | Independent<br>(37 CFR 1.16b))  | •                         |             | Minus    | •••                              | -                 |      |                    |                         |                |                              |                        |  |
| ₹   | FIRST PRESENT   | Anon Ce u                 | ULTIPLE S   | DEPENDE  | NT CLARE (3) CF                  | E 1 Mich          |      |                    |                         | OR             | X S = .                      |                        |  |
| / /   |   |                           |             |          |                                  |                   | , -  | OTAL               |                         | OR             | TOTAL                        |                        |  |
| 21  | 18/06 ·   | (Column                   | in .        |          | (Column 2)                       | 40-1              | ,    | MOL FEE            |                         | OR             | ADDLFEE                      |                        |  |
| 71  | /   | CLAIM                     | IS          |          | · HIGHEST                        | (Calumn 3)        |      |                    | <del></del>             | 1              | <del></del>                  |                        |  |
| ENDMENT   |   | REMAIN<br>AFTEI<br>AMENOM | R           |          | NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA  |      | RATE               | ADDI-<br>TRONAL<br>FEE  |                | . RATE                       | ADDI-<br>TIONAL<br>FEE |  |
| ₫.  | Total (professional)  | $\frac{Q}{Z}$             | '           | Minus    | . 20                             | *                 | ×    | s=                 |                         | OR             | x \$ =                       |                        |  |
| 퉬   | Independent<br>(37 CFR 1 16/b))   | <u>_</u> Ž                |             | Minus    | - 2/                             | -                 | T,   | , .                |                         | ł              | <del></del>                  |                        |  |
| Ā   | FIRST PRESENT   | ATION OF M                | ULTIPLE D   | EPENDE   | NT CLAIM (37 CF)                 | R 1 (6(0))        |      | , .                |                         | OR             | × 5=                         | <u>-</u> -             |  |
|   |   |                           |             |          |                                  |                   | 7    | OTAL               |                         | OR 1           | TOTAL                        | ·                      |  |
| •   | If the entry in co  | lumn 1 is le              | ss than t   | he entry | in column 2, write               | e "0" in column 3 |      | OOLFEE [           |                         | OR             | ADDIFEE                      |                        |  |
|   | if the Propest N  | under Pre-                | MARINIO D   | aid Ear  | IN THIS SPACE (                  |                   |      | 20".               | •                       |                |                              | - 1                    |  |

The 'Highest Number Previously Paid For' (Total or Internation is nearly).

The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to life (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Clied Information Officer, U.S. Patent and Tradehark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.